

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	E.H.		08-26-01
O.I.P.E. CLASSIFIER	12	32	7/5
FORMALITY REVIEW	M.M.	572	108-14-01
RESPONSE FORMALITY REVIEW	MTB	954	11/6/01

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
+ ..... Allowed      I ..... Interference  
- (Through numeral) ..... Canceled      A ..... Appeal  
+ ..... Restricted      O ..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
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